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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Enclosed please find the executed REVOCATION OF POWER OF ATTORNEY BY ASSIGNEE, NEW POWER OF ATTORNEY, CHANGE OF CORRESPONDENCE ADDRESS AND CHANGE OF ATTORNEY DOCKET NUMBER for the following Application Serial Numbers.

Application Serial No.	Attorney Docket No.
11/509,327	37528-502C01 (21800-004002)
10/429,336	37528-502F01 (21800-004001)
11/615,615	37528-503C01 (21800-005003)
11/615,642	37528-503C02 (21800-005004)
10/712,277	37528-503F01 (21800-005001)
10/579,330	37528-503N01 (21800-005002)

Respectfully Submitted,

Dated: _

March 11, 2008

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to a calendon of information unless & displays a valid OMB posted number. Inder the Paperwork Reduction Act of 1995, no persons are required to re Application Number 10/579,330 11/12/04 REVOCATION OF POWER OF Filing Date Coroneo First Named Inventor ATTORNEY WITH **NEW POWER OF ATTORNEY** Art Unit AND Examiner Name CHANGE OF CORRESPONDENCE ADDRESS 37528-503N01 (21800-005002) Attorney Docket Number hereby revoke all previous powers of attorney given in the above-identified application A Power of Attorney is submitted herewith. OR 64046 I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with 64046 Customer Number. OR Firm or Individual Name Address

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Appl	lcant/Inventor.	
Assi State	gnee of record of the entire inter- ement under 37 CFR 3.73(b) is e	nclosed. (Form PTO/SB/96)
	SIGNATURE	of Applicant or Assignee of Record
Signature	WilBan (′/
Name	Mitchell B. Campbell	
Date	3/5/04	Telephone 6 10-325. 20 90 4 801
NOTE: Signature signature is requ	as of all the inventors or easigness of record of fred, see below.	the ordine interest or their representative(a) are required. Submit multiple forms if more than one
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STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Coroneo Filed/issue Date: 11/12/04 Application No./Patent No.: 10/579,330 Entitled: Ocular Pressure Regulation Corporation Transcend Medical, Inc. (Type of Assignee, e.g., corporation, perincrahip, university, government agency, etc.) (Name of Assistace) states that it is: 1. The assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is: in the patent application/patent identified above by virtue of either. A. [] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded In the United States Patent and Trademark Office at Reel 018622 _, or for which a copy , Frame <u>0816</u> thereof is attached. B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows: The document was recorded in the United States Patent and Trademark Office at , or for which a copy thereof is attached. Reel Frame

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Additional documents in the chain of title are listed on a supplemental sheet.

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

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was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

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Signature

Mitchell B. Campbell

Printed or Typed Name

President & CEO

Date

Date

Telephone Number

As required by 37 CFR 3.73(b)(1)(f), the documentary evidence of the chain of title from the original owner to the assignee

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the essignment in the records of the USPTO. See MPEP

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to Re (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed explication form to the USPTO. Time will vary depending upon the including case. Any comments on the amount of time you require to complete this term and/or suggestions for reducing this burden, should be each to the Chief information Officer, U.S. Peparimort of Commence, P.O. Box 1450, Absondria, VA 22313-1450. DO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Petents, P.O. Box 1450, Alexandria, VA 22313-1450.

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